



OLR RESEARCH REPORT

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INSURANCE COVERAGE OF DIABETES-RELATED GOODS AND SERVICES IN NEW YORK AND CONNECTICUT

By: Janet L. Kaminski Leduc, Senior Legislative Attorney

You asked for a (1) summary of both New York and Connecticut's diabetes insurance coverage mandates, (2) legislative history of the New York mandate, and (3) list of health plans in New York.

SUMMARY

New York law requires insurance coverage for various diabetes equipment and related supplies. It also requires coverage of medically necessary diabetes self-management education in certain circumstances. The law, which began as Assembly Bill 1335 in 1993, took effect January 1, 1994.

Connecticut law requires insurance coverage for laboratory and diagnostic tests for all types of diabetes and medically necessary equipment, drugs, and supplies for insulin-dependent, insulin-using, gestational, and noninsulin-using diabetes. It also requires coverage for outpatient self-management training prescribed by a licensed health care professional.

There are 90 health plans in New York, as shown in Table 1 below.

INSURANCE COVERAGE FOR DIABETES

New York

New York law requires health insurance policies, including health maintenance organizations (HMO) contracts, to cover certain equipment and supplies for the treatment of diabetes if recommended or prescribed by a physician or other licensed health care provider with prescribing authority (N.Y. Ins. Law §§ 3216(i)(15-a), 3221(k)(7), and 4303(u) and N.Y. Comp. Codes R. & Regs. tit. 10, § 60-3.1)). Coverage must be provided for:

1. lancets and automatic lancing devices;
2. glucose test strips;
3. alcohol swabs, skin prep wipes and IV prep (for cleaning skin);
4. blood glucose monitors (e.g., glucometers);
5. blood glucose monitors for the visually impaired;
6. control solutions used in blood glucose monitors;
7. diabetes data management systems for management of blood glucose;
8. urine testing products for glucose and ketones;
9. insulin;
10. insulin infusion devices;
11. oral and injectable anti-diabetic agents used to reduce blood sugar levels;
12. injection aids (e.g., insulin drawing-up devices for the visually impaired);
13. cartridges for the visually impaired;
14. disposable injectable insulin cartridges and pen cartridges;
15. other disposable injectable medication cartridges and pen needles used for diabetes therapies;

16. oral agents for treating hypoglycemia (e.g., glucose tablets and gels);
17. glucagon emergency kits;
18. syringes; and
19. insulin pumps, equipment, and supplies for the pump (e.g., batteries, semi-permeable transparent dressings, insertion devices, insulin infusion sets, reservoirs, cartridges, clips, skin adhesive and skin adhesive remover, and tools specific to the prescribed pump).

The law also requires coverage for medically necessary diabetes self-management education and education relating to diet, including home visits, when provided by:

1. a physician or other licensed health care provider legally authorized to prescribe treatment,
2. staff as part of an office visit for diabetes diagnosis or treatment,
3. certified diabetes nurse educator,
4. registered dietitian, or
5. certified nutritionist or dietitian.

Coverage is subject to the same deductibles, copayments, and coinsurance as required for similar types of benefits in the insurance policy or contract.

The New York State Department of Health publishes guidance on the law for health care providers at http://www.health.ny.gov/diseases/conditions/diabetes/private_health_insurance_plans.htm.

Connecticut

Testing and Treatment. Connecticut law requires health insurance policies, including HMO contracts, to cover laboratory and diagnostic tests for all types of diabetes. The policies and contracts must cover medically necessary (1) treatment of insulin-dependent, insulin-using, gestational, and noninsulin-using diabetes and (2) equipment, in

accordance with a treatment plan, drugs, and supplies prescribed by a licensed practitioner (CGS §§ [38a-492d](#) and [38a-518d](#)).

Outpatient Self-Management Training. Connecticut law also requires health insurance policies and HMO contracts to cover outpatient self-management training prescribed by a licensed health care professional for the treatment of insulin-dependent, insulin-using, gestational, and noninsulin-using diabetes (CGS §§ [38a-492e](#) and [38a-518e](#)). “Outpatient self-management training” includes education and medical nutrition therapy. It must be provided by a certified, registered, or licensed health care professional (1) trained in the care and management of diabetes and (2) authorized to provide such care within the scope of his or her practice.

After a person is diagnosed with diabetes, a policy or contract must cover medically necessary training visits as follows:

1. up to 10 hours of initial training visits, including counseling in nutrition and the proper use of diabetic equipment and supplies;
2. up to four hours of training and education after a physician’s subsequent diagnosis shows that a significant change in symptoms or conditions requires modification of the self-management program; and
3. up to four hours of training and education because of new techniques and treatment for diabetes.

Benefits provided for outpatient self-management training are subject to the same terms and conditions that apply to all other benefits under the policies or contracts.

LEGISLATIVE HISTORY OF NEW YORK’S DIABETES MANDATE

We contacted the New York Legislative Library for the legislative history of New York’s diabetes insurance coverage mandate. Kate Balassie, law librarian, provided us with the limited information available, and we have summarized this below.

New York Assemblyman Sweeney introduced A 1335, *An Act to Amend the Insurance Law in Relation to Requiring Certain Health Insurance Policies to Cover Necessary Treatment of Diabetes*, in the New York State Assembly on January 14, 1993. The Assembly referred the bill to the Committee on Insurance on the same day. The committee previously held a public hearing on the topic on November 18, 1992.

The Assembly passed the bill and referred it to the Senate on May 17, 1993. The Assembly recalled the bill from the Senate on June 22, 1993. It amended the bill on June 24 and repassed it and resent it to the Senate on June 28. The Senate passed the bill on June 30, 1993. The governor signed it into law on July 21, 1993. The law took effect January 1, 1994.

The New York Insurance Department opposed the bill because of its “longstanding position” of opposing health insurance benefit mandates. The State Department of Health similarly opposed the bill due to its estimated fiscal impact (an annual cost of \$68.4 million) and because the department viewed the bill as unlikely to produce cost savings. The Business Council of New York State, Inc. opposed the bill because it was a mandate that would likely increase the cost of insurance policies.

Among the supporters for the bill were the New York Division of Women, American Diabetes Association, Medical Society of the State of New York, New York State Dietetic Association, New York State Podiatric Medical Association, and New York State Nurses Association. Supporters stressed that diabetes is a serious health problem for many New York residents that can lead to health complications that are burdensome to the affected people, as well as their employers and health care providers. They noted that the bill would minimize the effects of diabetes through active self-management of the condition and would help diabetics lead normal, healthy lives as productive, contributing members of society.

NEW YORK HEALTH PLANS

According to the New York State Department of Financial Services, there are 90 health plans in New York, as shown in Table 1 (see <https://myportal.dfs.ny.gov/web/guest-applications/ins.-company-search>).

Table 1: New York Health Plans

NEW YORK HEALTH PLANS
Company Name
Aetna Health Inc
Aetna Health Insurance Company of New York
Allegany-Cattaraugus Schools Medical Health Plan
American Independent Network Insurance Company of New York
Amsterdam House Continuing Care Retirement Community

Table 1 (continued)

NEW YORK HEALTH PLANS
Company Name
Arcadian Health Plan of New York, Inc.
Atlantis Health Plan, Inc.
Canterbury Woods
Capital District Physicians Health Plan
Catholic Special Needs Plan, LLC
Catskill Area Schools Employees Benefit Plan
Cayuga-Onondaga Area School Employees' Healthcare Plan
CDPHP Universal Benefits, Inc.
Chautauqua County School Districts' Medical Health Plan
CIGNA Healthcare of New York, Inc.
Co-Op Care Plan
Commercial Travelers Mutual Insurance Company
Community Blue
Comprehensive Care Management Corporation
Cuatro LLC
Delta Dental of New York, Inc.
Dentcare Delivery Systems, Inc.
Eastern Vision Service Plan, Inc.
Elderplan, Inc.
Empire HealthChoice Assurance, Inc.
Empire HealthChoice HMO, Inc.
Essence Healthcare of New York, Inc.
Excellus Health Plan
Excellus Health Plan, Inc.
Fox Run at Orchard Park
Freelancers Insurance Company, Inc.
GHI HMO Select, Inc.
Glen Arden Inc
Greater Tompkins County Municipal Health Insurance Consortium
Group Health Incorporated

Table 1 (continued)

NEW YORK HEALTH PLANS
Company Name
GuildNet, Inc.
Health Advantage Plan
Health Insurance Company of America, Inc.
Health Insurance Plan of Greater New York
Health Net Insurance of New York, Inc.
Health Net of New York, Inc.
Healthnow New York Inc.
Healthplex Insurance Company
HIP Health Maintenance Organization
HIP Insurance Company of New York
Home First, Inc
Humana Insurance Company of New York
Independence Care System
Independent Health Association, Inc.
Independent Health Benefits Corporation
Jefferson's Ferry
Jefferson-Lewis et. al. School Employees Healthcare Plan
Kendal at Ithaca
Kendal on Hudson
Liberty Health Advantage, Inc.
Managed Health, Inc.
MedAmerica Insurance Company of New York
Medco Containment Insurance Company of New York
MVP Health Insurance Company
MVP Health Plan, Inc.
MVP Health Services Corp.
Orange-Ulster School Districts Plan
Oxford Health Insurance, Inc.
Oxford Health Plans (NY), Inc.
Partners in Community Care

Table 1 (continued)

NEW YORK HEALTH PLANS
Company Name
Peconic Landing at Southold
Preferred Assurance Company, Inc.
Pupil Benefits Plan, Inc.
Putnam/Northern Westchester Health Benefits Consortium
Quality Health Plans of New York, Inc.
Rayant Insurance Company of New York
Renaissance Health Insurance Company of New York
Security Health Insurance Company of America, New York, Inc.
Senior Health Partners, Inc.
Senior Network Health LLC,
Senior Whole Health of New York, Inc.
Solstice Health Insurance Company
St. Lawrence-Lewis Counties School Districts Employees Medical Plan
State-Wide Schools Cooperative Health Plan
Steuben Area School Employees' Benefit Plan
Summit at Brighton
Total Aging in Place Program, Inc
Touchstone Health HMO, Inc.
United Concordia Insurance Company of New York
UnitedHealthcare Insurance Company of New York
Unitedhealthcare of New York, Inc.
VNS CHOICE
WellCare Health Insurance of New York, Inc.
Westchester Meadows
Woodland Pond

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